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chalin smith

703-549-76922

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10/24/2008

SMITH PATENT CONSULTING CONSULTING, LLC  
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CHALIN SMITH (Depositor's name)  
CHALIN SMITH (Signature)  
11/13/2008 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/581,269	06/01/2006	Stefan Arnold	LNK-009	3141

TITLE OF INVENTION: ERYTHROPOIETIN SOLUTION FORMULATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/26/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS	11/14/2008 CNGUYEN3 00000000 10581269			
DEBERRY, REGINA M	1647	514-008000	01 FC:1501	02 FC:1504	1510.00 OP	300.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 CHALIN A. SMITH  
2 SMITH PATENT  
3 CONSULTING, LLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

BIOGENERIX AG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MANHEIM, GERMANY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Date 11/13/2008

Typed or printed name

CHALIN SMITH

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